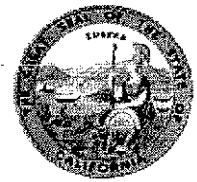




DIANA M. BONTÁ, R.N., Dr. P.H.  
Director

State of California—Health and Human Services Agency  
**Department of Health Services**



GRAY DAVIS  
Governor

November 8, 2002

Medi-Cal Eligibility Branch Information Letter No.: I 02-08

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: NOTIFICATION TO MEDI-CAL BENEFICIARIES-CRAIG V. BONTÁ  
(Reference ACWDL No. 02-45)

The purpose of this letter is to inform the county welfare departments that the enclosed notice was mailed to Medi-Cal beneficiaries on October 9, 2002. This notice is being released to all Medi-Cal beneficiaries who received an extended month of Medi-Cal eligibility for June and July 2002 under the Ramos v. Meyers settlement.

This notification serves to inform the affected Medi-Cal population regarding their entitlement under the Craig v. Bontá lawsuit, which prohibits the Department of Health Services (DHS) from terminating a beneficiary's SSI linked Medi-Cal benefits on or after June 30, 2002. DHS has also been ordered to provide continued full-scope Medi-Cal coverage until an eligibility redetermination for other Medi-Cal programs has been completed.

If you have any questions regarding this letter, please contact Mr. Bill Walsh, Chief of the Policy B Unit, at (916) 657-2941.

ORIGINAL SIGNED BY

Beth Fife, Chief  
Medi-Cal Eligibility Branch

Enclosure



Do your part to help California save energy. To learn more about saving energy, visit the following web site:  
[www.consumerenergycenter.org/flex/index.html](http://www.consumerenergycenter.org/flex/index.html)

714 P STREET, ROOM 1692, P.O. BOX 942732, SACRAMENTO, CA 94234-7320  
(916) 657-2941

Internet Address: [www.dhs.ca.gov](http://www.dhs.ca.gov)

## DEPARTMENT OF HEALTH SERVICES

714/744 P STREET

P.O. BOX 942732

SACRAMENTO, CA 94234-7320



Notice Preparation Date: 10/08/02

«First» «M» «Last»  
«address1»  
«address2»  
«city» «state» «zip»

**Supplemental Security Income/State Supplemental Payment****Social Security Number: «ssn»****Beneficiary ID Number: «beneid»**

The Social Security Administration has notified the Department of Health Services (DHS) that your Supplemental Security Income/State Supplemental Payment (SSI/SSP) cash payment has stopped. Even though you are no longer receiving SSI/SSP, the Department informed you of an extended month of Medi-Cal eligibility for June or July 2002. However, due to recent litigation in the matter of the Craig v Bontá lawsuit you will continue to receive full scope Medi-Cal benefits without a share of cost until your eligibility for other Medi-Cal programs can be redetermined.

Your eligibility for Medi-Cal will continue. **Do not throw away your Medi-Cal plastic card.** If you have any questions regarding this notice or your Medi-Cal, please contact the State of California, Department of Health Services, Medi-Cal Eligibility Branch at (916) 654-9162.